

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 72598

Check if different  
than previously  
reported. (ACC)

NEWPORT

KY

41072

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00493924

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

BROGHAMER, KEVIN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BROGHAMER, KEVIN, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

## REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">51111.83</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">17112.69</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">13906.94</span>	<span style="border: 1px solid black; padding: 2px;">241900.76</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">31019.63</span>	<span style="border: 1px solid black; padding: 2px;">293012.59</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">7008.39</span>	<span style="border: 1px solid black; padding: 2px;">269001.35</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">24011.24</span>	<span style="border: 1px solid black; padding: 2px;">24011.24</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
11 / 29 / 2016

To:

M M / D D / Y Y Y Y Y  
12 / 31 / 2016

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2951.60

139001.60

(ii) Unitemized .....

1857.48

2945.48

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

4809.08

141947.08

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

55100.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

4809.08

197047.08

## 12. Transfers From Affiliated/Other

Party Committees.....

9096.82

44743.08

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

78.60

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

1.04

32.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

13906.94

241900.76

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

13906.94

241900.76

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7008.39	223301.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7008.39	223301.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	1000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	24500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2700.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	17500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7008.39	269001.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7008.39	269001.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4809.08	197047.08
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4809.08	194347.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	7008.39	223301.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	78.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	7008.39	223222.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 15  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NUCKOLLS, JIMMY, , ,**

Mailing Address 3840 ROCK CREEK TERRACE DR

City  
HIGH RIDGE

State  
MO

Zip Code  
63049-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 28 / 2016

Transaction ID : SA11A.740104

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODNEY, JAMESS, MONROE, ,**

Mailing Address 19100 W 8 MILE RD

City  
SOUTHFIELD

State  
MI

Zip Code  
48075-5726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 29 / 2016

Transaction ID : SA11A.740096

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEA, CHRIS, , MR.,**

Mailing Address 1104 KING RICHARD BLVD

City  
JOHNSON CITY

State  
TN

Zip Code  
37604-3720

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEYROCK ENERGY LLC

Occupation (for Individual)  
OPERATIONS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 30 / 2016

Transaction ID : SA11A.740066

Amount of Each Receipt this Period

201.60

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2951.60

2951.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. RAND PAUL VICTORY KENTUCKY**

Mailing Address PO BOX 190

City  
NEWPORT

State  
KY

Zip Code  
41072

FEC ID number of contributing  
federal political committee.

C

C00608745

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9096.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2016

Transaction ID : SA12.740023

Amount of Each Receipt this Period

9096.82

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CARTER, JOAN, , MRS.,**

Mailing Address 182 TAVISTOCK LN

City  
HADDONFIELD

State  
NJ

Zip Code  
08033-3602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UM HOLDINGS LTD.

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : SA.734746.13.1608

Amount of Each Receipt this Period

2400.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RAND PAUL VICTORY KENTUCKY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FRANCIS, DOUG, , MR.,**

Mailing Address 36 SAGE CRK

City  
IRVINE

State  
CA

Zip Code  
92603-0411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GHOST GROUP

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2016

Transaction ID : SA.733365.13.1608

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RAND PAUL VICTORY KENTUCKY

**SUBTOTAL** of Receipts This Page (optional)..... ►

9096.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KILTS, JAMES, M., MR.,

Mailing Address 3 GREENWICH OFFICE PARK  
FLOOR 2

City  
GREENWICH

State  
CT

Zip Code  
06831-5154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERVIEW CAPITAL

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 08 / 2016

Transaction ID : SA.739185.13.1608

Amount of Each Receipt this Period

2700.00

☒ Memo Item

TRANSFER

JFC ATTRIB: RAND PAUL VICTORY KENTUCKY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

9096.82



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PAUL, KELLEY, , ,**

Mailing Address P.O. BOX 72598

City  
NEWPORTState  
KYZip Code  
41072-0598Purpose of Disbursement  
EXPENSE REIMBURSEMENT - SEE MEMOS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

917.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City  
DALLASState  
TXZip Code  
75235-1647Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

FEC Identification Number

**C****Transaction ID : SB21B.I15271**

Amount of Each Disbursement this Period

11.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City  
DALLASState  
TXZip Code  
75235-1647Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

FEC Identification Number

**C****Transaction ID : SB21B.I1527**

Amount of Each Disbursement this Period

11.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

917.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City  
DALLASState  
TXZip Code  
75235-1647Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			13			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1527**

Amount of Each Disbursement this Period

895.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AIR COMMAND INC.**

Mailing Address 209 PENNSYLVANIA AVE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			01			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

5500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE BANK**

Mailing Address 924 BROADWAY AVE, #KY3-1000

City  
BOWLING GREENState  
KYZip Code  
42101-2566Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			01			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5550.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHASE BANK**

Mailing Address 924 BROADWAY AVE, #KY3-1000

City  
BOWLING GREENState  
KYZip Code  
42101-2566Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				01				2016					

FEC Identification Number

**C** **Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

 25.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHASE PAYMENTECH**

Mailing Address P.O. BOX 809001

City  
DALLASState  
TXZip Code  
75380-9001Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2016					

FEC Identification Number

**C** **Transaction ID : SB21B.I1527C**

Amount of Each Disbursement this Period

 25.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD, STE 400

City  
TYSONS CORNERState  
VAZip Code  
22182Purpose of Disbursement  
COMPLIANCE SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				02				2016					

FEC Identification Number

**C** **Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

 250.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 300.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				02				2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2632 MARINE WAY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1126Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				27				2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

39.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

2.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1525**

Amount of Each Disbursement this Period

2.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			19			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

14.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			22			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

6.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			23			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

6.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			29			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

1.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			30			2016					

FEC Identification Number

**C****Transaction ID : SB21B.I1526**

Amount of Each Disbursement this Period

18.88

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

FEC Identification Number

**C****Transaction ID : SB21B.I1526I**

Amount of Each Disbursement this Period

82.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

FEC Identification Number

**C****Transaction ID : SB21B.I1526I**

Amount of Each Disbursement this Period

11.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105-3727Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

FEC Identification Number

**C****Transaction ID : SB21B.I1526I**

Amount of Each Disbursement this Period

3.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

98.24

6988.39